



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2025


Corporation

- Filing period: February 1 - May 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by May 31

FILED

APR 14 2025

CER BY 4793

1. Entity ID Number 000074669		2. Exact name of the Corporation Electro-Tec Systems, Inc.			
3. Principal Office Address 12 Elizabeth Drive			City Lincoln	State RI	Zip 02865
4. NAICS Code 561621		6. Brief description of the character of business conducted in Rhode Island Providing security systems for home and business.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Todd F. Kilsey			Vice-President Name Todd F. Kilsey		
Street Address 12 Elizabeth Drive			Street Address 12 Elizabeth Drive		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
Secretary Name Todd F. Kilsey			Treasurer Name Todd F. Kilsey		
Street Address 12 Elizabeth Drive			Street Address 12 Elizabeth Drive		
City Lincoln	State RI	Zip 02865	City Lincoln	State RI	Zip 02865
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			2000	Stock	1,000
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative Todd F. Kilsey				Date 4-1-2025	
Signature of Authorized Representative 					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov